#### DEPARTMENT OF AGING

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## PROGRAM MEMO

TO: AREA AGENCIES ON AGING (AAA)	NO.: PM 02-19 (P)
SUBJECT: Revised Title V Senior Community	DATE ISSUED: July 26, 2002
Service Employment Program (SCSEP)	
Monthly Expenditure Report and Request for	
Funds (CDA 29)	
REVISED: July 2002	EXPIRES: Until Superseded
REFERENCES: PM 00-11 (P), PM 01-19 (P)	SUPERSEDES:
PROGRAMS AFFECTED:	
[ ] All [ ] Title III-B [ ] Title III-C1/C2 [ ]	Title III-D [ ] Title III-E <b>[X]</b> Title V
[ ] CBSP [ ] MSSP [ ] Title VII [ ]	ADHC [ ] Other:
REASON FOR PROGRAM MEMO:	
[ ] Change in Law or Regulation [ ] Response to Inc	quiry [X] Other Specify: Revised form and Instructions
INQUIRIES SHOULD BE DIRECTED TO: Your Assigned	AAA-Based Team

The purpose of this Program Memorandum (PM) is to transmit the **revised** Title V SCSEP Monthly Expenditure Report and Request for Funds (CDA 29, revised July 2002), and to provide instructions for completing the form. The CDA 29 is used for reporting program expenses, enrollee slots, and requesting funds for the Title V SCSEP.

The revised CDA 29 has been redesigned to: 1) increase ease of use by reducing program data reported and eliminating duplicative entries, 2) maintain uniformity with other CDA fiscal processes, 3) remove the signatures of the AAA Director and staff person, and 4) replace a paper process (per PM 00-11 (P)) with electronic submission.

## Changes in the process for submission of the CDA 29 include:

- The completed CDA 29 must be sent as an e-mail attachment.
- The e-mail cover memo must identify in the subject line the Title V Program, PSA number, and the Year/Month of reported <u>expenditures</u>. For example: TV340207 (Title V, PSA 34, year 2002, month of July).



- The Excel file (CDA 29) document must be named using these four elements in the following order: Program (2 letters), PSA number (2 digits), calendar year (2 digits), and month of expenditures (2 digits).
- New mailboxes have been created to accept the submission of the new CDA 29. Your e-mail, with attachment, must be sent to the appropriate electronic mailbox for the AAA-Based Teams:

AAA-Based Team 1 - tm1title5@aging.ca.gov AAA-Based Team 2 - tm2title5@aging.ca.gov tm3title5@aging.ca.gov

An electronic master copy of the CDA 29 (in Excel format, with formulas) will be emailed to all AAA Fiscal Officers simultaneously with the distribution of this PM.

This policy becomes effective July 1, 2002. The due date for submitting the CDA 29 (Rev. 7/02) will continue to be the 15<sup>th</sup> of each month. The first submission will be the July 2002 Report of Expenditures/Requests for funds, due to CDA by August 15, 2002.

## Original Signed By Lynda Terry

Lynda Terry Director

Attachments

## Title V Senior Community Service Employment Program (SCSEP) Monthly Expenditure Report and Request for Funds

PSA No:						
Grantee Agency:						
Street Address:						
City, State, ZIP:						
Date:	Fiscal Year:		Contract No:			
A. EXPENDITURES	Month: Year:				<b>3.5</b> GO GWG	I
	ADMINISTRATION			PROGRAM COSTS		
<b>Funding Source</b>	(a) General Costs	(b) Indirect Costs	(c) Total Admin	(d) <b>Program EWFB</b>	(e) Program Other	(f) TOTAL
1. Federal Share	Costs	Costs	Aumm	EWFD	Other	
2. Federal 502(e) Share						
3. Total Federal Share						
5. Total rederal Share						
4. State Share						
5. Local Match Cash	1	<u> </u>		F	<u> </u>	
6. Local Match In-Kind						
0. 2000 1/2000 11 1200				<u> </u>		
7. Total Expenditures						
B. ENROLLMENT			C. REQUE	ST FOR FU	NDS	
Month:	Year:		Month:		Year:	
8. Slots Filled			10. Federal Funds			
9. Temporary Slots Filled	1		11. State Funds			
For State Use Only						
AAA-Based Team Fiscal Specialist: Date:		Date:	AAA-Based Team Coach:			Date:
		<del></del>		<del></del>		<del></del>

# Instructions for Completing the Title V Senior Community Service Employment Program (SCSEP) CDA 29 (Rev. 7/02)

The Monthly Expenditure Report and Request for Funds form (CDA 29) is designed for reporting program expenses (rounded to the nearest whole dollar), enrollee slots, and requests for funds (rounded to the nearest whole dollar) for the Title V SCSEP.

The completed CDA 29 must be sent as an <u>e-mail attachment</u> to the appropriate AAA-Based Team emailbox and is due by the 15<sup>th</sup> of each month.

(Signatures of the AAA director and staff are no longer required.)

## In the top section of the form enter the following information:

- PSA No. for your AAA.
- Grantee Agency name. Ensure that it is exactly as stated on the Standard Agreement (STD 213).
- Street Address, City, State, and ZIP Code.
- Date the report is completed.
- Fiscal Year.
- Contract No. Ensure that it is the same as the "Agreement Number" on the Standard Agreement (STD 213).

#### A. EXPENDITURES Month: Year:

• Enter the month and year for which expenditures are being reported.

### **Funding Source**

#### Line 1. Federal Share

 Enter the amount of federal funds expended for each cost category during the monthly reporting period.

#### Line 2. Federal 502(e) Share

If applicable to your PSA, enter the amount of authorized Section 502(e) federal funds expended for each cost category during the monthly reporting period. (Example: If you spent \$1,000 in federal funds and \$100 of that amount was spent on 502(e) activities, \$900 would be listed in the Federal Share column and \$100 would be listed in the 502(e) Share column.)

#### Calculate Totals Left to Right:

- Add General Costs to Indirect Costs to get Total Admin (under ADMINISTRATION heading) for lines 1 and 2 (a+b=c).
- Add (c) Total Admin to (d) Program EWFB (Enrollee Wages and Fringe Benefits) and (e) Program Other categories (under PROGRAM COSTS heading) to calculate TOTAL for lines 1 and 2 (c+d+e=f).

#### Line 3. Total Federal Share

Add lines 1 and 2 in each column to calculate all totals for Federal Share.

#### Line 4. State Share

 Enter the State funds expended during the monthly reporting period for Program/EWFB cost category (d) and enter same total in TOTAL column (f).

#### Line 5. Local Match Cash

 For each cost category, enter the amount of cash (non-federal and non-State dollars) contributed locally as cash match to support the program for the monthly reporting period.

#### Line 6. Local Match In-Kind

 For each cost category, enter the dollar value of goods and/or services contributed at the local level as in-kind match to support the program for the monthly reporting period.

#### Calculate Totals Left to Right:

- Add General Costs to Indirect Costs to get Total Admin (under ADMINISTRATION heading) for lines 5 and 6 (a+b=c).
- Add Total Admin to Program EWFB and Program Other categories (under PROGRAM COSTS heading) to calculate TOTAL for lines 5 and 6 (c+d+e=f).

#### Line 7. Total Expenditures

Add lines 3 through 6 in each column to calculate Total Expenditures.

### B. ENROLLMENT Month: Year:

• Enter the same month and year as shown in Item A (above).

#### Line 8. Slots Filled

 Enter the number of slots (positions) filled at the end of the monthly reporting period.

#### Line 9. Temporary Slots Filled

 Enter the number of temporary slots (positions) filled at the end of the monthly reporting period.

#### C. REQUEST FOR FUNDS Month: Year:

Enter the month and year Title V funds are being requested.
 Example: If you are reporting expenditures for July, you will be requesting funds (an advance) for the month of September.

#### Line 10. Federal Funds

Enter your federal fund request, rounded to the nearest whole dollar.

#### Line 11. State Funds

• Enter your state fund request, rounded to the nearest whole dollar.

#### For State Use Only

This section is to be completed by CDA staff.

Note: Do not report expenses or request funds for different fiscal years on the same CDA 29.